

THORNAPPLE

MANOR

Testimony on House Bills

Repeal of State Limits on Use of Hospital Swing Beds

HOUSE COMMITTEE ON HEALTH POLICY

Representative Gail Haines, *Chairperson*

March 17, 2011

My name is Jim DeYoung, and I am the administrator at Thornapple Manor, the Barry County-owned medical care facility in Hastings, Michigan. I have worked there for 15 years, 10 of those as administrator. For the seven years prior to that, I was controller for Gerber Memorial Health Services in Fremont, Michigan, a rural hospital licensed with swing beds.

The testimony you will hear from other sources today will tell you that the reason this bill to repeal state limits on the use of hospital swing beds should be defeated is because skilled nursing facilities in this state currently provide post-acute services to our elderly population in a much more cost-effective manner than in the acute care setting of a hospital. That argument is true.

Another reason that has or will be given is that skilled nursing facilities have a much more elder-friendly environment than the acute-care setting of a hospital. That argument is also true. My facility, Thornapple Manor, has just undergone a \$20 million renovation financed by our own community to ensure just such an environment is given to our elderly population. The public demands it. I have personally been told by residents returning from our local hospital that they would rather die than to have to go back to the hospital. I do not believe that that meant we have a bad local hospital. On the contrary, it's one of the best rural hospitals in the state, but we as skilled nursing facilities SPECIALIZE in taking care of our frail elderly population. We assist them with feeding themselves. We know that if they are unable, we must turn them over on a regular basis to avoid pressure ulcers. We provide activities and personal care that hospitals are not staffed or equipped to do.

This bill is an obvious attempt by the hospital association to take over a portion of the business that skilled nursing facilities have become very good at providing inexpensively. It is also the ONLY portion of business that produces a bottom line for our facility. Medicaid does not pay the full cost of providing care to 80% of the population we serve. The passing of this bill would simply devastate our business at the expense of the residents we serve and the taxpayer. The long-term care industry was originally given the right to provide rehab services in order to reduce costs for those services. What would be your rationale for returning that business to the acute care setting?

In the seven years I served as controller for Gerber Memorial Health Services in Newaygo County, it was rare that we needed to use a swing bed day because we didn't have available long-term beds locally. By definition, swing beds are, and should only be used when local skilled nursing facilities are full, and that will most likely be rare. That's good public policy, as care in an acute care setting is much more expensive.

This proposed bill would be bad public policy, and would be bad for the residents of the state of Michigan.

Thank you.

James C. DeYoung, NHA, MBA